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APPLICANTS

Aida Inbal, Hod Hasharon, ISRAEL;
 Rima Dardik, Rishon Le Zion, ISRAEL;
 Jonathan Leor, Gane-Tikva, ISRAEL;
 Gerhard Dickneite, Marburg, GERMANY;

**** CONTINUING DATA *******

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**** FOREIGN APPLICATIONS *******

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**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

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35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Verified and Acknowledged	/AGNES BEATA ROOKE/ Examiner's Signature	Initials	ISRAEL	6	16	2

ADDRESS

FINNEGAN, HENDERSON, FARABOW, GARRETT & DUNNER
 LLP
 901 NEW YORK AVENUE, NW
 WASHINGTON, DC 20001-4413
 UNITED STATES

TITLE

Use of factor XIII for stimulating the perfusion of ischemic tissue

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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